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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)					Docket Number (Optional)	
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))					RCHP-128US	
Application Number 10/550,923					Filed September 22, 2006	
For BIOMIMETIC HIERARCHIES USING FUNCTIONALIZED NANOPARTICLES AS BUILDING BLOCKS						
	Art Unit 1656				Examiner Anand U. Desai	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
	Fee Small Entity Fee					
\boxtimes	One month	(37 CFR 1.17(a)(1))	\$130	\$6	35	\$ <u>65</u>
	Two months	(37 CFR 1.17(a)(2))	\$490	\$2	45	\$
	Three months	(37 CFR 1.17(a)(3))	\$1110	\$5	55	\$
	Four months	(37 CFR 1.17(a)(4))	\$1730	\$8	65	\$
	Five months	(37 CFR 1.17(a)(5))	\$2350	\$11	175	\$
\boxtimes	Applicant claims small entity status. See 37 CFR 1.27.					
	A check in the amount of the fee is enclosed.					
\boxtimes	Payment by credit card. Form PTO-2038 is attached.					
	The Director has already been authorized to charge fees in this application to a Deposit Account.					
\boxtimes	The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-0350</u> . I have enclosed a duplicate copy of this sheet.					
	WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
	I am the applicant/inventor.					
	 assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). 					
	attorney or agent of record. Registration Number: 54,650.					
	attorney or agent under 37 CFR 1.34. Registration number if actiling under 37 CFR 1.34					
m m 4/2						
_	Signature			November 14, 2008 Date		
	•					
-	Christopher A. Rothe Typed or Printed Name			610-407-0700 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more						
than one signature is required, see below*.						
☐ Total of forms are submitted.						

This collection of Information is required by 97 CFR 1.136(a). The Information is required to obtain or retain a benefit by the public which is to file (and by the LUFTLO process) an application. Confidentially is governed by 50 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to lake a firm of the process of the process of the collection is estimated to lake a firm of the process of the collection is estimated to lake a firm of the collection in the collection is estimated to lake a firm of the amount of the you require to Complete this form and off suggestions for enclosing this between should be sent by the Chef Information Collect, U.S. Patient and Trademark Office, U.S. Patient and Trademark Office, Commissioner for Patients, P.O. Bot 1450, Alexandria, V.A. 22313-1456. U.S. NO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patients, P.O. Bot 1450, Alexandria, V.A. 2231-1456.